

## CAMPBELL COUNTY PLANNING & ZONING

24 W. Fourth St., Newport, KY 41071-0340

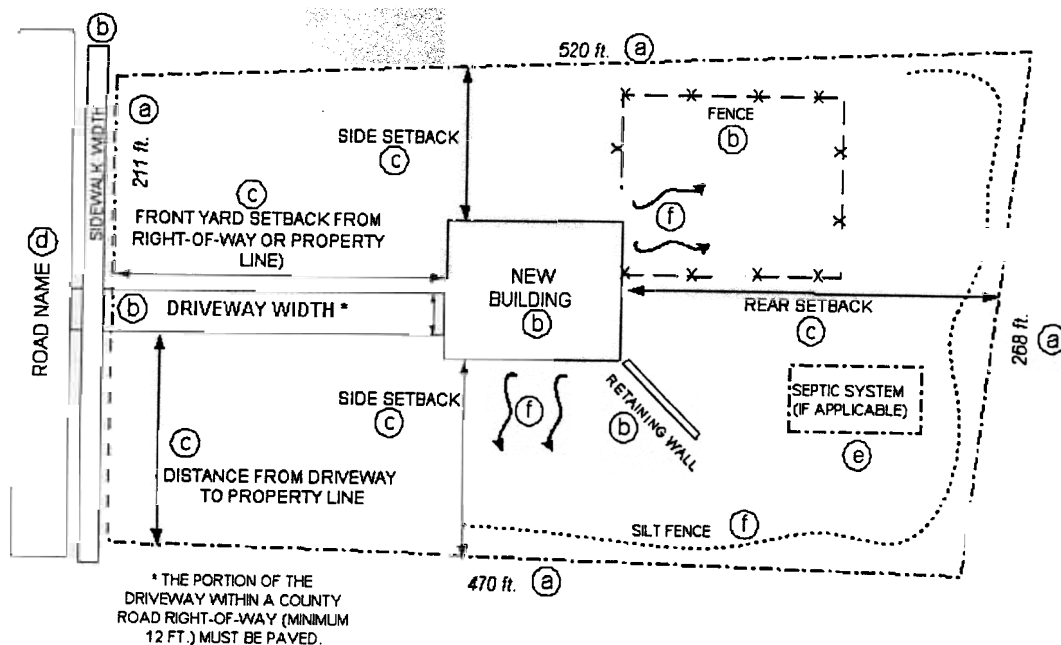
Phone (859) 292-3880 Fax (859) 292-3888

www.campbellcountky.org

### RESIDENTIAL BUILDING PERMIT INSTRUCTIONS

Please fill out the application in its entirety (all spaces) and be sure to sign it on the back. Place N.A. for all items not applicable. Attach the following:

- 1 A copy of the approved and recorded plat (if applicable)
- 2 Two sets of building plans One set will be returned to you
- 3 Two copies of a site plan similar to the example below, drawn to scale including the following
  - a) A footprint sketch showing the shape and dimensions of the lot
  - b) The location and dimensions of all existing and proposed buildings or additions to existing buildings; sidewalks; driveways; retaining wall and fences.
  - c) The front, side and rear setback dimensions (in feet) from property lines or right-of-ways to any existing or proposed structures.
  - d) The location and names of all existing roads, indicating whether they are public or private; and any right-of-ways and access easements of record.
  - e) The location of all utilities and septic systems when applicable
  - f) Provisions for erosion control and surface water drainage



(over)



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### RESIDENTIAL BUILDING PERMIT APPLICATION

**1. ADDRESS OF PROPOSED CONSTRUCTION** \_\_\_\_\_

*If an address has not yet been assigned, attach a completed "House Number Application" form*

- 2. PROJECT IS LOCATED IN** ☐ Unincorporated Campbell County, **OR IN THE CITY OF**  
☐ California ☐ Crestview ☐ Melbourne ☐ Silver Grove ☐ Woodlawn

SUBDIVISION \_\_\_\_\_ LOT # \_\_\_\_\_ DEED BOOK \_\_\_\_\_ PAGE \_\_\_\_\_ PIDN \_\_\_\_\_

	OWNER *	APPLICANT	CONTRACTOR **
NAME			
ADDRESS			
CITY			
STATE/ZIP			
PHONE #			
FAX #			
CELL #			

\* *If the owner is the General Contractor, only attach a copy of the homeowner's Certificate of Liability Insurance*

\*\* *If the owner is not the General Contractor, attach a copy of the General Contractor's Liability and Workers Compensation Insurance Certificate and Campbell County Occupational License.*

- 3. PROPOSED BUILDING ACTIVITY** ☐ New Construction ☐ Remodeling ☐ Addition  
☐ Site-built Single-family Dwelling ☐ Manufactured Home ☐ Modular Home # Bedrooms \_\_\_\_\_  
Other (describe) \_\_\_\_\_

**4. ESTIMATED COST** \_\_\_\_\_

**5. TYPE OF SEWAGE DISPOSAL**

- ☐ Public Sewers (Sanitation District 1)  
☐ Septic System *Attached a copy of the "Onsite Sewage Disposal System Construction Permit"*  
☐ Private Waste Water Treatment Plant *"Attached copy of Division of Water Construction Permit"*

- 6. TYPE OF WATER SUPPLY** ☐ Cistern ☐ Pendleton County Water District  
☐ Northern KY Water Service District *Attach "Water Service Tap Review form"*

**7. ENCROACHMENT PERMIT**

- ☐ County Road *Attached completed Campbell County Road Dept. Encroachment Permit Application*  
☐ State Road *Contact Kentucky Dept. of Highways District Office, Ft. Mitchell, KY (859) 341-2700*  
☐ Private Road *Attach copy of deed restrictions or right-of-way easement*

- 8 FLOODPLAIN** Is project located in a Floodplain? ☐ Yes ☐ No  
*If yes, attach copy of "Kentucky Division of Water Construction Permit"*

- 9. STEEP SLOPE** Is this project located on a Hillside Slope of 20% or Greater? ☐ Yes ☐ No  
*If yes, Project must be designed in accordance with Campbell County Hillside Development Controls (over)*

10. **APPLICANT SIGNATURE** I hereby certify that the information contained in this application and attachments is true and correct and that any misrepresentations or misstatement of facts shall be grounds for denial or revocation of the permit.

**APPLICANT** \_\_\_\_\_ **DATE** \_\_\_\_\_

**All fees are non-refundable. Permit fees are doubled if the building has been started prior to issuance of the building permit.**

Check which documents are submitted with this application:

- ☐ Two sets of building plans
- ☐ Two copies of site plan
- ☐ Copy of Plat
- ☐ Construction Affidavit
- ☐ Contractors Occupational License
- ☐ Liability Insurance Certificate
- ☐ County or State Road Encroachment Permit
- ☐ House Number Application
- ☐ Water Service Tap Review (No. KY Water Dist.)
- ☐ Septic System Construction Permit
- ☐ Permit fee, payable to Campbell County Planning and Zoning

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**INFORMATION BELOW TO BE COMPLETED BY BUILDING OFFICIAL**

APPLICATION NO.	FEES	DATE RECEIVED _____
Building	Zoning	APPROVED APP. W / CONDITIONS
Zoning	Building	<input type="checkbox"/> Building <input type="checkbox"/> Building
Electrical _____	Electrical _____	<input type="checkbox"/> Zoning <input type="checkbox"/> Zoning
	Encroachment	Permit Issued _____
ZONE _____	CO _____	by _____
Sq. footage	Late Penalty	
	Total Fees _____	Rec. _____ <input type="checkbox"/> Check no. <input type="checkbox"/> Cash